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BIBDATASHEET

CONFIRMATION NO. 3397

Bib Data Sheet

SERIAL NUMBER 09/978,189	FILING DATE 10/15/2001 RULE	CLASS 536	GROUP ART UNIT 1646	ATTORNEY DOCKET NO. P2630P1C7
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APPLICANTS

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EJA

** CONTINUING DATA *****

This application is a CON of 09/918,585 07/30/2001 ABN

which is a CIP of PCT/US00/04341 02/18/2000

~~which claims benefit of 60/123,957 03/12/1999~~~~and claims benefit of 60/126,773 03/29/1999~~~~and claims benefit of 60/130,232 04/21/1999~~~~and claims benefit of 60/131,445 04/28/1999~~~~and claims benefit of 60/134,287 05/14/1999~~~~and claims benefit of 60/141,037 06/23/1999~~~~and claims benefit of 60/145,698 07/26/1999~~~~and claims benefit of 60/162,506 10/29/1999~~

which is a CIP of 09/380,138 8/29/99

which is the National Stage of
PCT/US99/05028 3/8/99

and claims benefit of 60/083,336 4/27/98

and claims benefit of 60/064,249 11/3/97

** FOREIGN APPLICATIONS *****

~~UNITED STATES OF AMERICA PCT/US99/05028 03/08/1999~~~~UNITED STATES OF AMERICA PCT/US99/08313 04/15/1999~~~~UNITED STATES OF AMERICA PCT/US99/28551 12/02/1999~~~~UNITED STATES OF AMERICA PCT/US99/28565 12/02/1999~~~~UNITED STATES OF AMERICA PCT/US99/30095 12/16/1999~~~~UNITED STATES OF AMERICA PCT/US99/31243 12/30/1999~~~~UNITED STATES OF AMERICA PCT/US99/31274 12/30/1999~~~~UNITED STATES OF AMERICA PCT/US00/00219 01/05/2000~~

EJA

Foreign Priority claimed

☐ yes ☒ no

35 USC 119 (a-d) conditions met

☐ yes ☐ no ☐ Met afterVerified and
Acknowledged

Allowance
Examiner's Signature *Eden B. Hara*

Initials *EM*

STATE OR

COUNTRY
CA

SHEETS

DRAWING
237

TOTAL

CLAIMS
13

INDEPENDENT

CLAIMS
2

ADDRESS

35489

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94025-3506

TITLE
NUCLEIC ACID ENCODING PRO273 POLYPEPTIDES

<p>FILING FEE RECEIVED 740</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> All Fees								
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